

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	DM	14223	11/11/01
RESPONSE FORMALITY REVIEW			2/26/01

INDEX OF CLAIMS

..... Rejected
..... Allowed
(Through numeral)... Canceled
..... Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
stap! additional sheet here

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